

October 30, 2024

**PROVIDER ALERT: OBSTETRICAL AUTHORIZATION & INITIAL ASSESSMENT FORM-
SUBMISSION REQUIREMENT**
Billing Changes Effective 12/1/2024

MedStar Family Choice District of Columbia requires notification of pregnancy immediately following an Enrollee's initial prenatal visit.

Notification of Anticipated Delivery-Obstetrical Authorization & Initial Assessment (OAIA) Form:

This form contains critical information related to pregnant Enrollees. MedStar Family Choice DC strongly encourages you to complete the OAIA form during the initial prenatal visit and submit the completed form to the Outreach Department via fax at 202-243-6253 within 10 days of completion. Timely submission of the OAIA form is essential for our Care Management Department to effectively coordinate care for our pregnant Enrollees.

The OAIA form helps us collect important health information about our pregnant Enrollees; this information is used to refer the Enrollee to helpful services, such as WIC and home visits, to support the health of both the Enrollees and their newborns before and after birth.

HCPCS Billing Codes:

H1000: Completion of the OAIA form and development of plan of care

Effective December 1, 2024, to receive reimbursement for the OAIA form, it must be completed in its entirety and submitted with the claim within 10 days of the initial visit. Please note reimbursement for H1000 is limited to one per pregnancy billing provider.

For detailed information regarding the OAIA form, please visit our website: [MedStar Family Choice DC Obstetrical Authorization & Initial Assessment Form](#).

For questions concerning this Provider Alert, please contact the MedStar Family Choice DC Provider Customer Services Department, Monday through Friday, 8 a.m. to 5:30 p.m.

Telephone: **800-261-3371**

Or

Email: **mfcdc-providerrelations@medstar.net**